

Application for Permit / License / Non-Driver ID



PERMIT / LICENSE / ID FORM

DRIVER LICENSE NUMBER / NON-DRIVER ID NUMBER

| | | | | | | | | | |
|---|--|---|-----|-----------|---|---------------------------------|--------------------------|---|---------|
| FIRST NAME | | | | | | | | | |
| MIDDLE NAME | | | | | | | | | |
| LAST NAME | | | | | | | | | |
| SUFFIX | | ** SUBMISSION OF THE SOCIAL SECURITY NUMBER IS REQUIRED BY N.J.A.C. 13:21-1.3. THE NUMBER WILL BE USED TO PREVENT ERRORS AND ENFORCE FEDERAL AND STATE LAWS, AND IN THE COLLECTION OF MOTOR VEHICLE FEES. | | | | **SOCIAL SECURITY NUMBER | | CHECK HERE IF YOUR ADDRESS HAS CHANGED FROM PREVIOUS RECORDS <input type="checkbox"/> | |
| MAILING ADDRESS (STREET, PO BOX, RURAL ROUTE) | | | | | RESIDENTIAL ADDRESS (IF DIFFERENT FROM MAILING ADDRESS) | | | | |
| CITY | | STATE | ZIP | COUNTY | CITY | | STATE | ZIP | COUNTY |
| FULL DATE OF BIRTH (MM/DD/YYYY) | | | SEX | EYE COLOR | WEIGHT | | HEIGHT | | ft. in. |
| SIGNATURE: | | | | | | | DATE (MM/DD/YYYY) | | |

I CERTIFY THAT THE STATEMENTS MADE BY ME ON THIS FORM ARE TRUE. I AM AWARE THAT IF ANY OF THE STATEMENTS ARE WILLFULLY FALSE, I AM SUBJECT TO ADMINISTRATIVE, CIVIL, AND/OR CRIMINAL PENALTY.
BA-208 (R10/20)

SELECT ONE: REAL ID STANDARD PERMIT (STANDARD ONLY)
SELECT ALL THAT APPLY: DRIVER LICENSE NON-DRIVER ID BOAT MOTORCYCLE
 MOPED AGRICULTURAL



THIS APPLICATION IS FOR AGENCY USE ONLY. DO NOT SEND VIA MAIL.

FOR MVC USE ONLY

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| <p>Trans Type: Standard</p> <p>6 Points of Identification*</p> <ul style="list-style-type: none"> - Primary Document: - Secondary Document(s): - Proof of Full Social Security Number: - Proof of Address: | <p>Trans Type: Real ID</p> <ul style="list-style-type: none"> - 2 Proofs of Residential Address: - 1 Proof of Full Social Security Number: - 6 Points of Identification*: |
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